



INFORMATION DISCLOSURE STATEMENT

Applicant : Sarac
App. No. : 10/624,864
Filed : July 22, 2003
For : PERCUTANEOUS ENDOVASCULAR
APPARATUS FOR REPAIR OF
ANEURYSMS AND ARTERIAL
BLOCKAGES
Examiner : Unknown
Group Art Unit : Unknown

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Enclosed is form PTO-1449 listing 5 references. Copies of disclosed U.S. patents and/or publications are not included pursuant to PTO waiver of the requirement under 37 C.F.R. § 1.98(a)(2)(i) for applications filed after June 30, 2003. Copies of other references, if listed, are enclosed.

This Information Disclosure Statement is being filed before the mailing date of a final action under 37 C.F.R. § 1.113 and before the mailing date of a Notice of Allowance under § 1.311. A certification under 37 C.F.R. § 1.97(e) is set forth below. Thus, no fee is required as set forth in 37 C.F.R. § 1.97(c).

Appl. No. : 10/624,864
Filed: July 22, 2003

Docket No. SIPE.001A
Customer No. 20,995



CERTIFICATION UNDER 37 C.F.R. § 1.97(e)(1)

I hereby certify that each item of information contained in this Statement was first cited in a communication from a foreign Patent Office in a counterpart foreign application not more than three months prior to the filing of this Information Disclosure Statement.

Respectfully submitted,

KNOBBE, MARTENS, OLSON & BEAR, LLP

Dated: 2/6/04

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FORM PTO-1449	U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE	ATTY. DOCKET NO. SIPE.001A	APPLICATION NO. 10/624,864
INFORMATION DISCLOSURE STATEMENT BY APPLICANT (USE SEVERAL SHEETS IF NECESSARY)		APPLICANT Sarac	
		FILING DATE July 22, 2003	GROUP Unknown

U.S. PATENT DOCUMENTS							
EXAMINER INITIAL	DOCUMENT NUMBER	DATE	NAME	CLASS	SUBCLASS	FILING DATE (IF APPROPRIATE)	
1	5,755,777	05/26/98	Chuter				
2	5,797,951	08/25/98	Mueller				
3	US 2001/0053930 A1	12/20/01	Kugler et al.				

FOREIGN PATENT DOCUMENTS							
EXAMINER INITIAL	DOCUMENT NUMBER	DATE	COUNTRY	CLASS	SUBCLASS	TRANSLATION	
						YES	NO
4	EP 0 947 179 A2	10/06/99	EPO				
5	EP 1 138 279 A2	10/04/01	EPO				

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EXAMINER	DATE CONSIDERED
*EXAMINER: INITIAL IF CITATION CONSIDERED, WHETHER OR NOT CITATION IS IN CONFORMANCE WITH MPEP 609; DRAW LINE THROUGH CITATION IF NOT IN CONFORMANCE AND NOT CONSIDERED, INCLUDE COPY OF THIS FORM WITH NEXT COMMUNICATION TO APPLICANT.	

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